

B6F (Official Form 6F) (12/07)

In re **Tamara Sue Crews**Case No. **14-35243**

Debtor

AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H U S B A N D W I F E J O I N T O R	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No.			2011 Cash Advance				
Allied Cash Advance 6845 Forest Hill Avenue Richmond, VA 23225		-					646.00
Account No. xxxx7280			Opened 8/01/06 Collection Attorney United States Postal Service				
Allied Credit/Alliance One Attn: Bankruptcy Po Box 2449 Gig Harbor, WA 98335		-					67.00
Account No. xxxxxxxxxxxxQQQQ			Med1 Lc3 Laboratory Corp Of Americ				
Amca/American Medical Coll Agency 4 West Chester Plaza Elmsford, NY 10523		-					720.00
Account No. xxxxxxxxxxxxQQQQ			Med1 Lc3 Laboratory Corp Of Americ				
Amca/American Medical Coll Agency 4 West Chester Plaza Elmsford, NY 10523		-					440.00
Subtotal (Total of this page)							1,873.00

10 continuation sheets attached

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In re **Tamara Sue Crews**

Case No. **14-35243**

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
 (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	H U S B A N D W I F E J O I N T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
			DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxxxxxxxxxQQQQ			Med1 Lc3 Laboratory Corp Of Americ				399.00
Amca/American Medical Coll Agency 4 West Chester Plaza Elmsford, NY 10523		-					
Account No. xxx xxx8953			Chase Bank/ Heritage First USA				9,320.40
Asset Acceptance Po Box 2036 Warren, MI 48090		-					
Account No.			Credit Card				1,084.47
Barclay Card Card Services PO Box 8833 Wilmington, DE 19899-8833		-					
Account No. xxxxxxxxxxxx7246			Med1 02 Bonsecours Physicians Practi				160.00
Berks Cc P.o. Box 329 Temple, PA 19560		-					
Account No. xxxxxxxxxxxx5621			Med1 02 Bonsecours Physicians Practi				148.00
Berks Cc P.o. Box 329 Temple, PA 19560		-					
Sheet no. <u>1</u> of <u>10</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)
							11,111.87

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
 (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	
Account No. xxxxxxxxxxxx5622		-	Med1 02 Bonsecours Physicians Practi				104.00	
Berks Cc P.o. Box 329 Temple, PA 19560								
Account No. xxx5050		-	2009-2011 medical				1,870.77	
Bon Secours Richmond Health Systems P. O . Box 404893 Atlanta, GA 30384-4893								
Account No.		-	2011 Cash Advance				646.00	
Cash-2-U 6100 Midlothian Turnpike Richmond, VA 23225								
Account No. xxxxxxxxxxxx5415		-	Opened 10/01/07 CollectionAttorney Mci Cnld				26.00	
Cbe Group 1309 Technology Pkwy Cedar Falls, IA 50613								
Account No. xxxxxxxxxxxx2894		-	Opened 2/01/08 Last Active 12/28/11 CreditCard				332.00	
Ccs/cortrust Bank 500 E 60th St N Sioux Falls, SD 57104								
Sheet no. <u>2</u> of <u>10</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)	2,978.77

B6F (Official Form 6F) (12/07) - Cont.

In re **Tamara Sue Crews**

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AMENDED
SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxxx0019 Charlottesville Bureau Pob 6220 Charlottesvill, VA 22911	-	Opened 8/01/09 CollectionAttorney Commonwealth Lab Consultants				120.00
Account No. xxxxxxxx4530 Cntry Door 1112 7th Ave Monroe, WI 53566	-	Opened 10/01/06 Last Active 5/05/08 ChargeAccount				328.00
Account No. 4124 Commonwealth Eye Care Associat 10431 Patterson Avenue Henrico, VA 23238	-	2010 medical				224.00
Account No. xxxxx-xCWR1 Commonwealth Radiology 1508 Willow Lawn dr. Ste. 102 Richmond, VA 23230	-	2011 medical				970.00
Account No. Creditonebnk PO Box 98872 Las Vegas, NV 89193	-					535.00
Sheet no. <u>3</u> of <u>10</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 2,177.00

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In re **Tamara Sue Crews**

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AMENDED
SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
 (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxxxxxxxxx3012 First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104	-	Opened 1/01/02 Last Active 4/03/06 CreditCard				542.00
Account No. xxxxxxxxxxxx1286 Fncc/Legacy Visa Attn: Bankruptcy Po Box 5097 Sioux Falls, SD 57117	-	Opened 8/01/08 Last Active 12/28/11 CreditCard				372.00
Account No. xx0643 Focused Recovery Solut 9701 Metropolitan Ct Ste North Chesterfield, VA 23236	-	Opened 5/01/09 CollectionAttorney Neurological Associates Inc A				39.00
Account No. xxxxxxxxxxxx7328 Hsbc Bank Attn: Bankruptcy Po Box 5213 Carol Stream, IL 60197	-	Opened 9/01/10 Last Active 1/04/12 CreditCard				393.00
Account No. xxxxxxx9001 Ic Systems Inc Po Box 64378 St. Paul, MN 55164	-	Opened 11/01/08 CollectionAttorney Stony Point Surgery Center				360.00
Sheet no. 4 of 10 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 1,706.00

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In re **Tamara Sue Crews**

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	
Account No. xxxxxxx9001	-		Opened 10/01/11 CollectionAttorney Gastrointestinal Specialists				81.00	
Ic Systems Inc Po Box 64378 St. Paul, MN 55164								
Account No. xxxxxx9001	-		Opened 1/01/09 CollectionAttorney Stony Point Surgery Center				77.00	
Ic Systems Inc Po Box 64378 St. Paul, MN 55164								
Account No. xxxxxxxx2450	-		medical				720.14	
Labcorp PO Box 2240 Burlington, NC 27216-2240								
Account No. xxxxxxxxxxxx0787	-		Opened 1/01/09 Last Active 1/27/11 FactoringCompanyAccount Idt-Hsbcorchard Standard - Mcs				2,528.00	
Lvnv Funding Llc Po Box 740281 Houston, TX 77274								
Account No. xxxxxx5220	-		Opened 8/01/08 FactoringCompanyAccount Bank Of America				3,752.00	
Midland Credit Mgmt In 8875 Aero Dr San Diego, CA 92123								
Sheet no. 5 of 10 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)	7,158.14

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In re **Tamara Sue Crews**

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Debtor

AMENDED
SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxxxxx0164		-	Opened 11/01/06 FactoringCompanyAccount Tribute Mastercard (1474)				1.00
Midland Credit Mgmt In 8875 Aero Dr San Diego, CA 92123							
Account No. xxxx# xx0423		-	2009-2010 medical				489.20
Midlothian Medical Care 3000 Watercove Road Midlothian, VA 23112							
Account No. xxxxx4001		-	Opened 5/01/11 CollectionAttorney 06 Nationwide Insurance				195.00
Nco Fin /99 Po Box 15636 Wilmington, DE 19850							
Account No. xxxxx0070		-	Opened 12/01/10 CollectionAttorney 06 Nationwide Insurance				123.00
Nco Fin /99 Po Box 15636 Wilmington, DE 19850							
Account No. xxx5104		-	Med1 02 Bon Secours Richmond Health				171.00
Pellettieri 991 Oak Creek Dr Lombard, IL 60148							
Sheet no. <u>6</u> of <u>10</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							979.20
Subtotal (Total of this page)							979.20

B6F (Official Form 6F) (12/07) - Cont.

In re **Tamara Sue Crews**

Case No. **14-35243**

Debtor

AMENDED
SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M
		D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M. I F C L A I M I S S U B J E C T T O S E T O F F, S O S T A T E.				
Account No. xxx5791		Med1 02 Bon Secours Richmond Health				126.00
Pellettieri 991 Oak Creek Dr Lombard, IL 60148	-					
Account No. xxx5050		Med1 02 Bon Secours Richmond Health				126.00
Pellettieri 991 Oak Creek Dr Lombard, IL 60148	-					
Account No. xxx1752		Med1 02 Bon Secours Richmond Health				126.00
Pellettieri 991 Oak Creek Dr Lombard, IL 60148	-					
Account No. xxx1746		Med1 02 Bon Secours Richmond Health				126.00
Pellettieri 991 Oak Creek Dr Lombard, IL 60148	-					
Account No. xxx2774		Med1 02 Bon Secours Richmond Health				126.00
Pellettieri 991 Oak Creek Dr Lombard, IL 60148	-					
Sheet no. <u>7</u> of <u>10</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 630.00

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In re **Tamara Sue Crews**

Case No. **14-35243**

Debtor

AMENDED
SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxx5787 Pellettieri 991 Oak Creek Dr Lombard, IL 60148		-	Med1 02 Bon Secours Richmond Health				107.00
Account No. xxx8212 Pellettieri 991 Oak Creek Dr Lombard, IL 60148		-	Med1 02 Bon Secours Richmond Health				100.00
Account No. xxx9363 Pellettieri 991 Oak Creek Dr Lombard, IL 60148		-	Med1 02 Bon Secours Richmond Health				93.00
Account No. xxx9366 Pellettieri 991 Oak Creek Dr Lombard, IL 60148		-	Med1 02 Bon Secours Richmond Health				4.00
Account No. xxxxxxA679 Powhatan Medical Associates P>O. Box 843356 Boston, MA 02284-3356		-	2011 medical				116.92
Sheet no. 8 of 10 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							420.92
Subtotal (Total of this page)							420.92

In re **Tamara Sue Crews**Case No. **14-35243**

Debtor

AMENDED
SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
 (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxx3897 Prof PI Svc Attn: Crissy Po Box 612 Milwaukee, WI 53201	-	Opened 8/01/11 CollectionAttorney Check Smart (5622)				1.00
Account No. xxxxxxxxxxxx7181 Receivable Management 7206 Hull Street Rd Ste North Chesterfield, VA 23235	-	Opened 11/01/10 CollectionAttorney Medical Payment Data				724.00
Account No. xxxxxxxxxxxx1090 Rjm Acq Llc 575 Underhill Blvd Ste 2 Syosset, NY 11791	-	Opened 10/01/08 FactoringCompanyAccount Target Stores - Retailers Nati				75.00
Account No. xxxxx4303 St. Francis Hospital P O Box 79214 Baltimore, MD 21279	-	3/14/2011 medical				151.33
Account No. xxxx0078 United Collect Bur Inc 5620 Southwyck Blvd Ste Toledo, OH 43614	-	Opened 3/01/11 CollectionAttorney Professional Emergency Care				326.00
Sheet no. 9 of 10 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 1,277.33

B6F (Official Form 6F) (12/07) - Cont.

In re **Tamara Sue Crews**

Case No. **14-35243**

Debtor

AMENDED
SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
 (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxxx8702		-	Opened 12/01/10 CollectionAttorney Professional Emergency Care				326.00
United Collect Bur Inc 5620 Southwyck Blvd Ste Toledo, OH 43614							
Account No.		-	Overpayment of benefits				22,592.68
Unum Life Insurance Company PO Box 180204 FRU/Benefit Accounting 6S610 Chattanooga, TN 37401							
Account No. xx1237		-	2011 medical				110.00
Virginia Surgical Associates 417 Libbie Ave. Richmond, VA 23226							
Account No.							
Account No.							
Sheet no. <u>10</u> of <u>10</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page) 23,028.68
(Report on Summary of Schedules)							Total 53,340.91

**United States Bankruptcy Court
Eastern District of Virginia**

In re **Tamara Sue Crews**

Debtor(s)

Case No. **14-35243**

Chapter **13**

**AMENDED
DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I certify under penalty of perjury that the foregoing is true and correct.

Date **October 7, 2014**

Signature **/s/ Tamara Sue Crews**

Tamara Sue Crews

Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571